

2012 EDGEFIELD COUNTY DIXIE YOUTH BASEBALL PLAYER REGISTRATION

(Please Print)

PLAYERS FULL NAME: _____ AGE as on May 1, 2012: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ EMAIL ADDRESS: _____

FATHER'S CELL PHONE: _____ MOTHER'S CELL PHONE: _____

EMERGENCY CONTACT NAME: _____ EMERGENCY CONTACT PHONE: _____

DOB: _____ BC # and State: _____

Medical Restrictions: _____

Medicines or Allergies: _____

PARENTAL AUTHORIZATION

I, parent or guardian of the above named candidate for a position in above mentioned baseball program, hereby gives approval to his/her participation in any and all league activities during the current season. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the parent or local league organization, the organizers, sponsors, supervisors, participants and persons transporting the player to and from activities, for any claim arising out of an injury to the player, except to the extent and in the amount covered by accident and/or liability insurance held by the local league.

I also grant permission to managing personnel or other league representatives to authorize and obtain medical care from any licensed physician, hospital or medical clinic should the player become ill or injured while participating in league activities away from home, or at other times when neither parent, nor guardian is available to grant authorization for emergency treatment.

I agree to return upon request the uniform and other equipment issued to the player in as good a condition as when received, except for normal wear and tear.

I will furnish a certified birth certificate of the above named candidate upon request by league officials.

Team and coach your child played for last season: _____

Will either parent be willing to help:

Head Coach: _____ Yes _____ No Asst Coach: _____ Yes _____ NO Concession: _____ Yes _____ No

Do you know any child unable to play due to lack of equipment, funds, transportation, etc.?

Which League are you signing up to play in?

_____ Bettis / Merriwether Dixie Youth _____ Edgefield Dixie Youth _____ Johnston Dixie Youth

The Board of Directors will make all of the final decisions and will do what is best for the league. Our age groups are 4-6 (T-Ball), 6-8 (Machine Pitch), 9-10 (Minor) and 11-12 (Major). Our goal is to teach the kids the basic fundamentals of baseball and good sportsmanship. We also want to make the teams in each league as even as possible. We prefer the kids play in the league they're assigned to, unless the Board approves for a player to play in a different league depending on the situation (players athletic ability, request from parent, etc). Only siblings will be guaranteed to be on the same team, but the Board will consider all requests. Under no circumstances is anyone allowed to move a child to a different team until approved by the Board. There will be no refunds after the first practice.

Name of Parent or Guardian: _____ Relationship: _____

Signature: _____ Date: _____

Amount paid \$ _____